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WEMMH PTO/SB/22 (09/06)  
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2006</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) <b>16673-8</b>																								
Application Number <b>10/088,018</b>		Filed <b>March 13, 2002</b>																								
For <b>METHOD AND SYSTEM FOR TRANSMITTING A CHAIN OF MESSAGES FOR DATABASE</b>																										
Art Unit <b>2144</b>		Examiner <b>Joseph R. Maniwang</b>																								
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above-identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table style="width: 100%; border: none;"><thead><tr><th></th><th style="text-align: center;"><u>Fee</u></th><th style="text-align: center;"><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input type="checkbox"/> One month [37 CFR 1.17(a)(1)]</td><td style="text-align: center;">\$120</td><td style="text-align: center;">\$60</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input checked="" type="checkbox"/> Two months [37 CFR 1.17(a)(2)]</td><td style="text-align: center;">\$450</td><td style="text-align: center;">\$225</td><td style="text-align: right;">\$ <u>450.00</u></td></tr><tr><td><input type="checkbox"/> Three months [37 CFR 1.17(a)(3)]</td><td style="text-align: center;">\$1020</td><td style="text-align: center;">\$510</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Four months [37 CFR 1.17(a)(4)]</td><td style="text-align: center;">\$1590</td><td style="text-align: center;">\$795</td><td style="text-align: right;">\$ _____</td></tr><tr><td><input type="checkbox"/> Five months [37 CFR 1.17(a)(5)]</td><td style="text-align: center;">\$2160</td><td style="text-align: center;">\$1080</td><td style="text-align: right;">\$ _____</td></tr></tbody></table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>23-3030</u>. I have enclosed a duplicate copy of this sheet.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b></p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p style="margin-left: 40px;"><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.171. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).</p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent of record. Registration Number: <u>35,714</u></p> <p style="margin-left: 40px;"><input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a): <u>35,714</u></p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"><div style="width: 45%;"><div style="border-top: 1px solid black; width: 100%; text-align: center;">Timothy N. Thomas</div><div style="border-top: 1px solid black; width: 100%; text-align: center;">Typed or Printed Name</div></div><div style="width: 45%; text-align: right;"><div style="border-top: 1px solid black; width: 100%; text-align: center;">March 19, 2007</div><div style="border-top: 1px solid black; width: 100%; text-align: center;">Date</div><div style="border-top: 1px solid black; width: 100%; text-align: center;">317-634-3456</div><div style="border-top: 1px solid black; width: 100%; text-align: center;">Telephone Number</div></div></div> <p><b>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below.</b></p> <p><input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.</p>				<u>Fee</u>	<u>Small Entity Fee</u>		<input type="checkbox"/> One month [37 CFR 1.17(a)(1)]	\$120	\$60	\$ _____	<input checked="" type="checkbox"/> Two months [37 CFR 1.17(a)(2)]	\$450	\$225	\$ <u>450.00</u>	<input type="checkbox"/> Three months [37 CFR 1.17(a)(3)]	\$1020	\$510	\$ _____	<input type="checkbox"/> Four months [37 CFR 1.17(a)(4)]	\$1590	\$795	\$ _____	<input type="checkbox"/> Five months [37 CFR 1.17(a)(5)]	\$2160	\$1080	\$ _____
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